



Scottish Government
Riaghaltas na h-Alba
gov.scot



Osakidetza

EIP on AHA Twinning 2020 Video Consultation



European Innovation
Partnership on Active
and Healthy Ageing

Knowledge Exchange Workshop 17 November 2020



Digital Health
& Care Scotland

kron+kgune
research centre on chronicity

First things first....



European Innovation
Partnership on Active
and Healthy Ageing

Go to www.menti.com

Use Code: 15 04 517

Workshop Agenda

09.00 - 10.05 CET	Welcome and introductions Donna Henderson, Head of International Engagement, Scottish Government Esteban de Manuel Keenoy, Director, Kronikgune
09.05 – 10.10	Scotland presentations Hazel Archer – Head of Programme – Near Me Marc Beswick – National Lead – Near Me Network Maimie Thompson – Communication Consultant – Near Me Programme Q&A
10.10 – 10.40	Basque Country presentation Lourdes Ochoa de Retana - Expert patients Programme Manager
10.40 – 11.00	Learning outcomes / next steps <ul style="list-style-type: none">• Capturing key learning – successful approaches, common challenges, outcomes for citizens, service providers, policy makers, government



European Innovation
Partnership on Active
and Healthy Ageing



Near Me

Hazel Archer

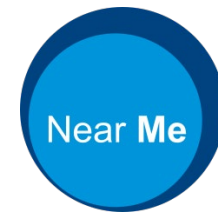
Head of Programme – Near Me

Key Components



- Easy to use
- Nothing to install
- No need to authenticate
- Works across a range of devices
- Low bandwidth

Integration



Type of appointment

▼

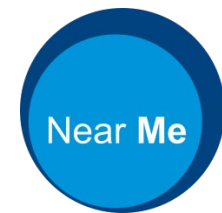
In person

Telephone

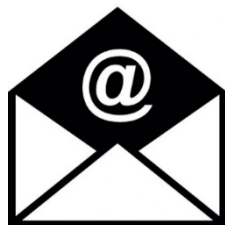
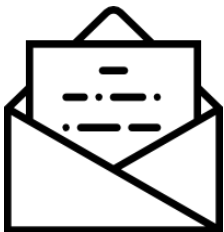
Video call



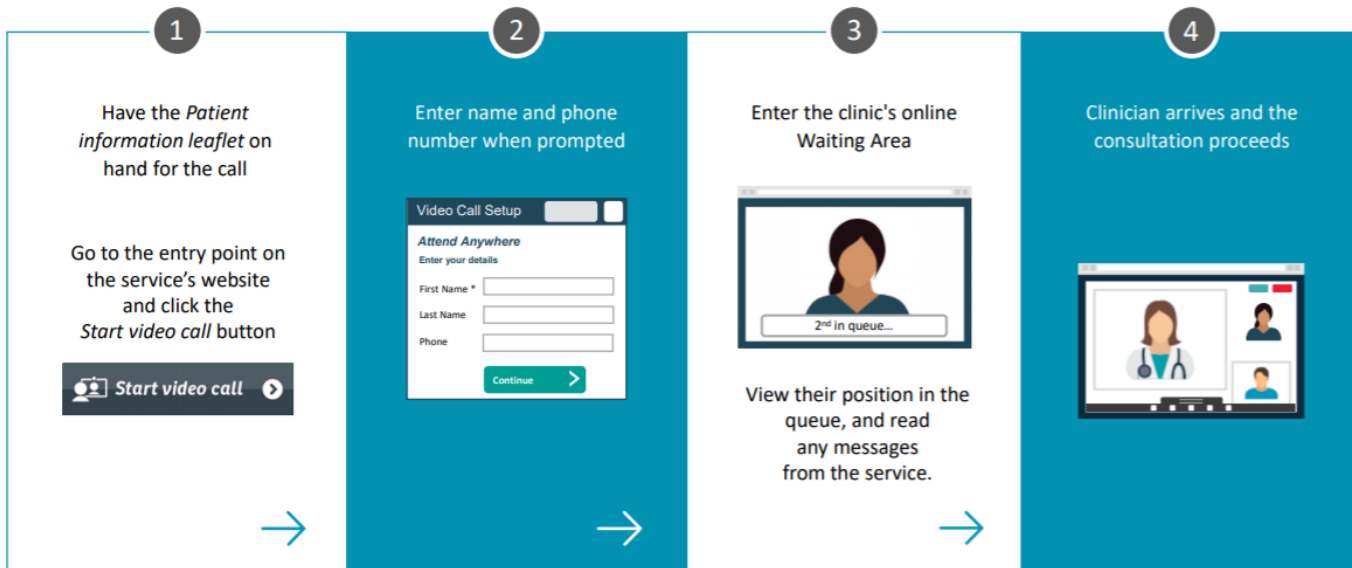
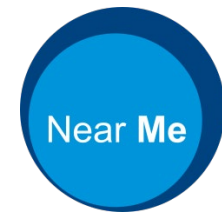
Access



nhsattend.vc/myclinic



Process



Overview



Video Call Management x

Secure | <https://nhs.attendanywhere.com/waiting-area/view-one/3911>

Quick View

Waiting Areas

1 WAITING
0 IDLE
3 MINUTES LONGEST WAIT
1 ATTENDED

1 Waiting Area has callers

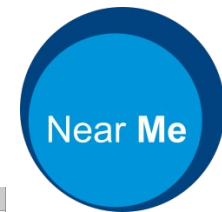
Meeting Rooms

- AA project meeting roo...
SCTT AA project team (SCTT)
- EPR Program
EPR Program (NHSG)
- Aberdeen Data Health S...
Aberdeen Data Health Science (N...
- AppDevs
AppDevs (NHSG)
- Attend Anywhere Enquir...
Attend Anywhere Enquirers (NHSG)

Displaying 5 of 30 Meeting Rooms

Reports

Clinic Dashboard



Video Call Management

Secure | <https://nhs.attendanywhere.com/waiting-area/view-one/3911>

Waiting Areas Meeting Rooms Reports Administration...

(demo) NHS ACME Health Surgery Waiting Area Waiting Area
Scottish Centre for Telehealth

Status		Caller	Participants
Waiting	33 min	Mark Demo	1
Waiting	0 min	Chris Ryan	1

Start calls with my microphone enabled

Start calls with my camera enabled

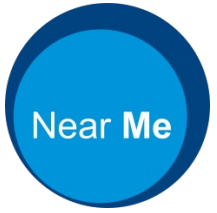
New caller alerts to 07825386320

Advanced Menu

What URL do I give to people?
<https://sctt.org.uk/attendanywhere>
Copy URL to Clipboard

This page lists all of the people either waiting for, or participating in, a video consultation with your service.

Only users with the **Service Provider** role can join a person in a call.

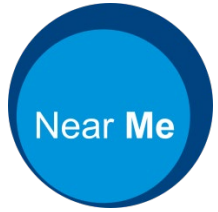


www.tec.scot/nearme

Security



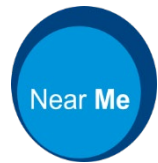
Group Video Calling



No ideal solution



Questions?



Near Me Training

Marc Beswick

National Lead – Near Me Network

Near Me forward-look work plan: June-December 2020 (produced 1 July 2020)

Near Me video consulting is transforming the way health and care consultations are provided. The aim of this document is to define the key priorities for the Near Me national programme for the next six months. It will be updated regularly to reflect emerging priorities.



www.tec.scot
www.nearme.scot

Near Me

Near Me Network: creating a national learning system

The Near Me Network will improve understanding of how to use video consulting by rapid learning in specific areas, combined with wider sharing and peer support.



Improvement Projects

These deep dive improvement projects will support rapid learning in a small group of teams focused on one specialty or area of practice. The outputs will include best practice guidance and care pathways.

Projects planned for June-December:

- Primary Care
- Out of Hours in primary care
- Deep end GP / Connecting Scotland
- Unscheduled care

Near Me Sharing Network

This part of the network is about sharing resources and best practice. Work will include:

- Create a dedicated Near Me website to house national guidance, training resources, case studies and best practice guide.
- Provide and work with partners to continue to provide regular Near Me webinars to share learning: webinars will cover both clinical and technical topics.
- User test the Near Me dashboard developed with NSS, and update for wider release in August. The aim is to improve access to data.

Public engagement

A public engagement [exercise](#) will take place in June and July to understand the public's views on the Near Me service and how it could be improved. The exercise also aims to raise awareness of Near Me. It includes a public and professional survey, and significant media activity. A national EQIA for Near Me is being developed, along with improved patient information leaflets (translated versions).

Social Care workstream

A new social care Near Me workstream will be established. It will be scoped in June-July, with a plan produced by August.

Ongoing national support

These national priority areas will ensure a Once for Scotland approach is continued

Platform

Continue to maintain free to use access to the Attend Anywhere platform, and work with the providers on system performance.

Technical support

Ensure service management, technical support and service desk functions are in place. Understand the equipment gap to improve access to video consulting. Work with patient management systems to embed video consulting.

Evaluation

Support the extension of the evaluation of Near Me by the University of Oxford.

Group consultations

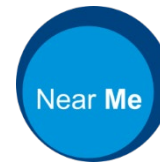
Review options and develop best practice for large group consultations.



Engagement

Develop and maintain strategic partnerships with a range of delivery organisations and professional bodies to embed Near Me.



Staff Training Sessions




**National Video Conferencing Service**


Bookings ▾Near Me ▾Webinars ▾Service Desk ▾Resources ▾

Search...

The National Video Conference Service connects the whole of NHS Scotland and the Scottish Government.


We provide a secure, simple and flexible way for users to connect with each other, patients and others worldwide, making travel optional and saving both time and money.




**NHS Staff**

We can securely connect many sites from

- VC units
- Cisco Jabber software
- Mobile devices
- Web browsers
- Phones

**Patients**

Using the Attend Anywhere/NearMe platform, clinicians can offer virtual clinics where patients join a secure waiting area using a web browser or mobile device.

**Free!**

Our VC and bridging service is fully supported by our service desk and free to use for all calls involving NHS Scotland staff

Service Status

Near Me Reporting
06/09/2020

Planned Maintenance

Attend Anywhere Platform Update 26 Oct

Other News

VC-Teams Link available to all from 16 November

NHS Near Me/ Attend Anywhere – email/username update

macOS Catalina and Jabber Movi

Browser Based Video Calls

Jabber/MOVI End of Life Update

iOS 11 and Jabber Video

Connect from any device, anywhere


You can connect to our conferences from any Windows, Mac, Android or iOS device, as well as standard video conference units and telephones. Presentations from a computer can be easily shared with all connected parties.

Every year we run thousands of video conferences across NHS Scotland, Scottish Government, and external sites such as councils, higher education and beyond.

We have over 1200 VC units installed across NHS Scotland, and many thousands of users using VC software on their PCs. All this runs on a single cohesive national network, so connecting sites for high quality video and presentation sharing is extremely simple.

Connectivity

- Supports H.323/SIP/g154/Web browser by WebRTC
- Join from mobile over 3G/4G/5G



<https://www.vc.scot.nhs.uk/>



Communications and Engagement Vision and Strategy, 2020

Vision and Strategy, 2020



NearMe



Vision

Use of Near Me in future health and care services

Vision

To deliver safe, person-centred and sustainable care through video consulting

29 June 2020



Introduction

Near Me video consulting is transforming the way people are accessing health and care services. Near Me is used in every NHS Board area in Scotland, and is now being expanded to care services. As part of the response to COVID-19, Near Me was made available in nearly every hospital and GP practice. Prior to March 2020, there were around 300 Near Me consultations a week: by June, it was nearly 17,000 a week, with more than 150,000 in total.

How to use Near Me

To use Near Me, you need a device for making a video call (like a smartphone) connected to the internet. For more information, see: www.nearme.scot

Use of Near Me in the “new normal”

Near Me can be used in any care setting, for both routine long-term condition appointments and for acute care. It is used in hospital, GP and community services. It can also enable professionals to work remotely from their base.



The Near Me team is running a public engagement exercise on this vision from Monday 29 June to Friday 24 July 2020. To tell us your views visit <https://response.questback.com/scottishgovernment/nearmeviews> To contact us, see details at www.nearme.scot

Aim: all health and care consultations are provided by Near Me whenever it is appropriate



Policy context

Increasing the use of video consulting to deliver care closer to people's homes is included in *Protecting Scotland's Future: the Government's Programme for Scotland 2019-2020*

Rationale for use

The key reasons for maximising use of Near Me across Scotland are:

- **Enables physical distancing:** Near Me enables services to continue to be provided without potential exposure to COVID-19, and reduces the number of people coming into NHS and social care premises.
- **Delivers person centred and convenient care:** Near Me enables people to attend appointments from the location of their choice. This can reduce travel, minimise time taken off work or school, or avoid needing carers to support.
- **Addresses environmental imperatives:** by reducing travel, Near Me improves the move towards net zero and the carbon footprint of services.

Communicating the Vision

<https://managementisajourney.com/summary-of-kotters-eight-step-leading-change-model/>

Step	Action	New Behaviour
1	Increase Urgency	People start telling each other, “Let’s go, we need to change things”
2	Build the guiding team	A group powerful enough to guide a big change is formed and they start to work together
3	Get the vision right	The guiding team develops the right vision and strategy for the change effort
4	Communicate for buy-in	People begin to buy into the change, and this shows in their behaviour
5	Empower action	More people feel able to act, and do act, on the vision
6	Create short-term wins	Momentum builds as people try to fulfil the vision, while fewer and fewer resist change
7	Do not let up	People make wave after wave of changes until the vision is fulfilled
8	Make change stick	New and winning behaviour continues despite the pull of tradition, turnover of change leader

The vision for Near Me

Public Engagement
29 June – 24 July 2020

Tell us your views by going to:
nearme.scot/views



Public Engagement

Near Me Technology Enabled Care Programme Scottish Government

Communicating the Vision

'Near Me in the "new normal" health and care service'

Engagement Exercise | Action Plan

Monday 29th June to Friday 24th July 2020

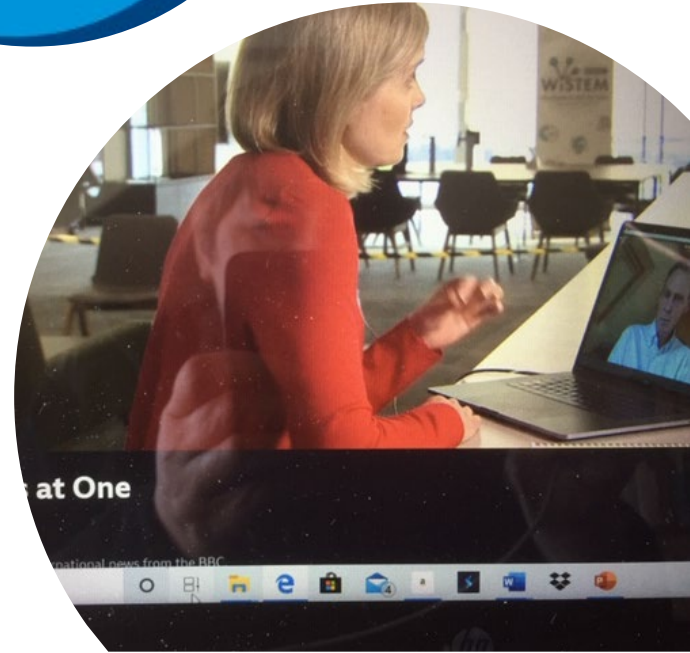
Version 2 – 26 June 2020

Code	Actions	Lead (s)	Deadline	Status	Notes
General					
1.1	Adopt standard email signatures, Near Me Logo, Link to webpage	Team	26 th June		
1.2	Prepare branding of Vision document to support engagement exercise/ Poster/Visuals	CM	26 th June	Complete	Go live 29 th June
1.3	Agree Hashtag for Engagement Exercise	MT/CM	26 th June	Ongoing	Twitter poll
1.4	Review possibility of Near Me email	HA	26 th June	Complete	Set up
Enabling Work Strategic Preparation					
2.1	Prepare Vision	CM/HA	May	Complete	
2.2	Secure sign off from Cabinet Secretary	MW	May	Complete	
2.3	Publish Vision on website	HA	May	Complete	
2.4	Share with board Near Me Leads	MW	May	Complete	
2.5	Share with board Executive Leads	MW	May	Complete	
2.6	Document support through mobilisation plans	Team	May	Complete	
2.9	Prepare Framework to Communicate Vision	MT	May	Complete	
2.10	Agree to have an Engagement Exercise	Team	w/b 8 June	Complete	
2.11	Agree approach and any phasing	Team	w/b 15 June	Complete	
2.12	Set dates	Team	w/b 15 June	Complete	29 th June -26 th July
2.13	Agree how to launch, Who etc	Team	w/b 15 June	Complete	Minimum via Media
2.14	Identify any budgetary requirements (branding, market research, printing, and Freepost, time)	MW	w/b 15 June	Ongoing	
2.15	Identify any internal processes to be followed; approvals; links to depts prior to launch	MW	w/b 15 June	Complete	
2.17	Briefings for Near Me Leads, HIS , Connecting Scotland	MT/RB	w/b 22 nd June		Make them aware of Engagement exercise
2.18	Discuss with HIS/ Scottish Health Council	MT	w/b 15 June	Actioned	Discussions ongoing

BBC UK Coverage

- BBC Breakfast
- BBC News Channel
- BBC One O'Clock News
(daily audience of 4 million)

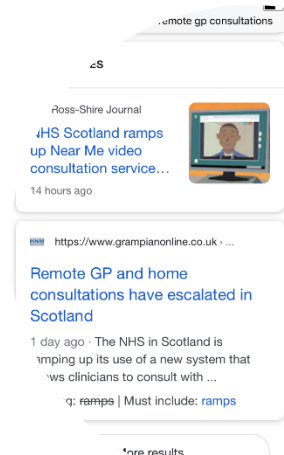
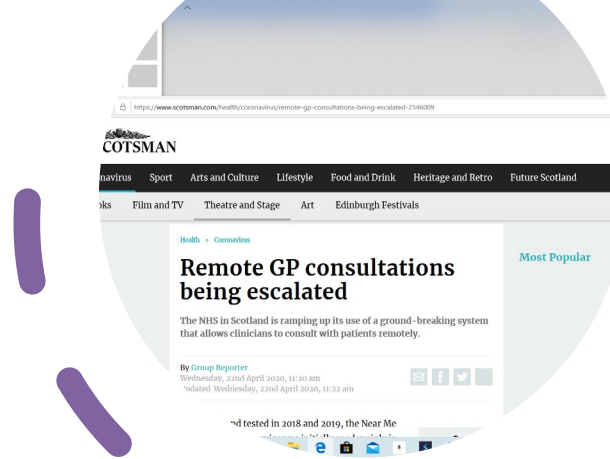
Near Me



Local Media

“Remote GP consultations being escalated”

Issued to 120 local media and all national media



Engagement

Active Low cost

Group	Type of feedback	Number of responses
General public	Online survey	4,025
Individuals	Survey by phone/ writing	47
Individuals	Written	16
Marie Curie service users	8 focus groups	37
People with learning disabilities	Focus groups	25
People with disabilities	Various	12
People whose first language is not English	Phone	30
Carers	Virtual group	5
Organisations (public)	Written	38
Healthcare professionals	Online survey	1,147
Healthcare professionals	Written	14
Professional bodies	Written	4
Total		5,400

Near Me

5,400 responses, public, patients and professionals

[Near Me Public Engagement Report, September 2020](#)

<https://twitter.com/NHSNearMe>

**NHSNearMe**
1,767 Tweets



[Edit profile](#)

NHSNearMe
@NHSNearMe

Near Me enables you to attend appointments by VC from a location of your choice. Co-designed with the public who picked the name "Near Me". nss.nearme@nhs.net

 Scotland, United Kingdom  nearme.scot  Joined December 2017

500 Following 3,501 Followers

[Tweets](#) [Tweets & replies](#) [Media](#) [Likes](#)

 **Pinned Tweet**

**NHSNearMe** @NHSNearMe · 30 Oct
. Would you believe @NicolaSturgeon @JeaneF1MSP @jasonleitch @DrGregorSmith @FionaCMcQueen has passed over 450,000 #NearMe video consultations - #adopting #adapting #adjusting Would a RT be in order to thank everyone helping to keep people seen and safe 🙌👍👏🥳

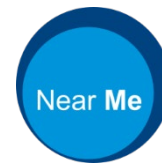
 6  86  194  

Top media Tweet earned 18.3K impressions

Delighted to hear CMO @DrGregorSmith on @BBCScotlandNews @BBCRadioScot give a rounded description of the use of #Nearme including many benefits but noting it will not be for everyone. He highlighted our survey  nearme.scot/views [@trishgreenhalgh](https://twitter.com/trishgreenhalgh)  pic.twitter.com/OYGKIUC9FI



 1  37  82



Training Materials

TURAS | Learn

COVID-19 Response Register Sign in

Home My Learning Record

Coronavirus (COVID-19)

Search... Q

All Coronavirus (COVID-19)

Learn Home > Coronavirus (COVID-19) > Remote consulting

< Coronavirus (COVID-19)

Remote consulting

Remote consulting

Resources and guidance to help practitioners with remote consulting.

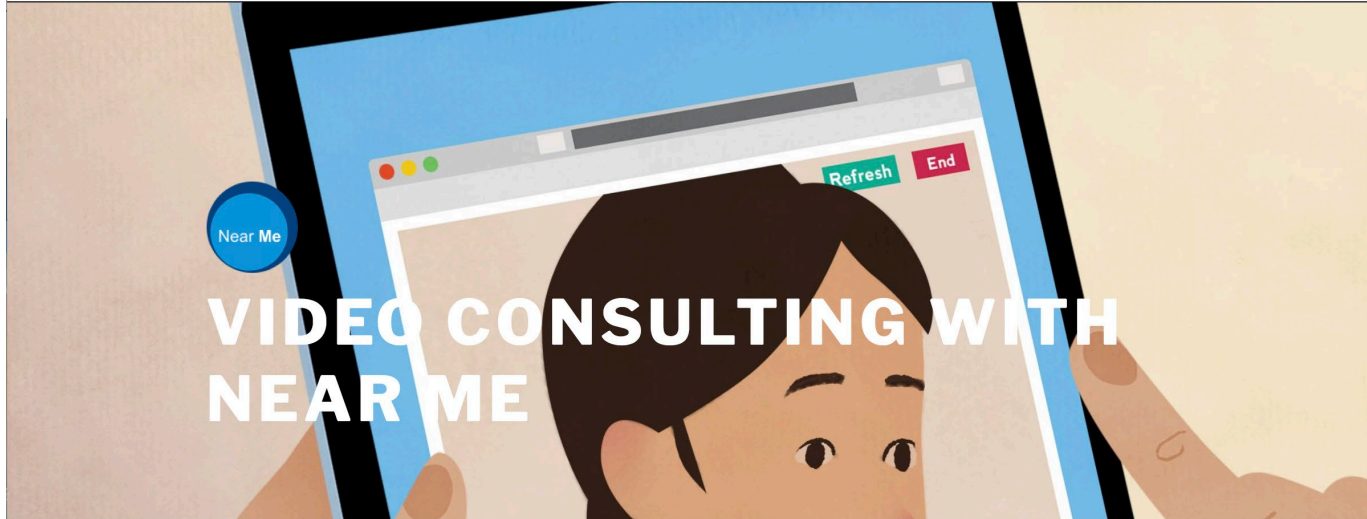
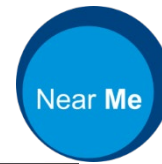
☆ Add to favourites

- Technical skills (how to use Near Me)
- Video consulting skills (for clinicians)
- Practices processes and other resources

<https://learn.nes.nhs.scot/28943/coronavirus-covid-19/remote-consulting>



Patient information website



What is Near Me?

What do I need?

How to make a Near Me call



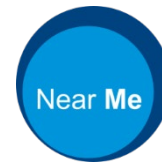
Public & Staff Survey

Make a test call

Frequently asked questions

Info for professionals

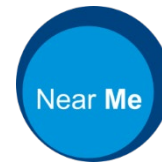
www.nearme.scot



Engagement Strategy

- Twitter: @NHSNearMe
- You Tube: <https://www.youtube.com/c/NHSNearMe/videos>
(with Basque subtitles available in settings)
- Quality Improvement Projects
- Professional Bodies
- Scottish Government
- NHS Education Scotland
- Webinars

Thankyou and Questions



PAZIENTE BIZIA

PACIENTE ACTIVO



Lourdes Ochoa de Retana
Head of the Paziente Bizia-Expert Patient Programme



Self-care and self-
management
education
programme



Group education
among EQUALS /
PAIRS

Plain language
Modelling



Basic knowledge
about the disease
+

Techniques and skills
that encourage
proactivity

EXPERT PATIENT

**Self-efficacy: Confidence that each person is capable of carrying out the action
he or she proposes**



PAZIENTE BIZIA
PACIENTE ACTIVO



PAZIENTE BIZIA
PACIENTE ACTIVO



PROGRAMME DEPLOYMENT CHRONOLOGY

July 2010: Training Methodology designed by Stanford University

September 2010: Dissemination of the project among professionals and citizens

November 2010: First courses in 4 organizations (Araba, Euzkerraldea, Gipuzkoa, Bidasoa) +EVALUATION (Clinical trial)

October 2011: First training course for new trainers

May 2012: Implementation of the programme in other organisations

January 2014: Adapting the methodology to our environment and context



Elaboración y desarrollo de materiales propios



- ❖ Manuals for instructor training.
- ❖ Manuals for monitors.
- ❖ Manuals for citizens.
- ❖ DVD with a physical exercise programme.
- ❖ Cd with relaxation exercises.



TRAINING METHODOLOGY

Training of trainers
(Stanford methodology)

Training of leaders / monitors
30H (theoretical - practical)

Training of patients and/or
caregivers





Monitors



**patients/carers attending
the workshops**

**patients/caregivers
referred from Patient
Associations**

**patients/carers
referred by health
professionals**

MONITORING SKILLS (EQUALS/PAIRS)

- Faithful to the content and philosophy of the programme.
- It is governed by the assigned times.
- Speaks comfortably in public. Encourages participation.
- Models appropriately. Does not judge people or actions. Is respectful. Maintains confidentiality.
- ONLY SUGGESTS, NOT ADVISES.
- Effectively manages group dynamics in difficult situations.
- Works in coordination and collaboration with fellow trainers.
- Listens, accepts and incorporates all suggestions given by the trainers.

PATIENT AND/OR CAREGIVER RECRUITMENT PROCESS

Through different channels, health professionals, press, radio, internet, social networks, patient associations, word of mouth, information sessions etc.

The **registration** of a candidate can be done in different **ways**:

- **Telephone: 943 00 65 51.**
- **Email address: pacienteactivo@osakidetza.eus**
- **Application form: <https://inkestagune.osakidetza.eus/index.php/373888>**
- **Direct inclusion of the healthcare professional in the Electronic Health Record (Osabide Global platform).**

FACE-TO-FACE MODE

7/8 Weekly sessions
(20-30 minuts/activity)

Groups between 12/15 members

2.5 hours

EXPERT PATIENT PROGRAMMES AIMED AT DIFFERENT TYPES OF PATIENTS:

Sessions given by 2 monitors, are carried out in groups and are participative.



- Aimed at people with any type of chronic illness and/or their main careers.
- Sessions of 2 hours and 15 minutes, 1 day a week, 7 weeks. Previously a 1.5 hour information session.



- Aimed at people with type 2 diabetes, and/or their caregivers.
- 2.5-hour sessions, 1 day per week, 7 weeks.



- Aimed at Gypsy community.
- 2 hour sessions, 1 day a week, 8 weeks. Previously a 1 hour information session.



- Aimed at people who have undergone an oncological process (and/or their main caregivers), and have completed chemo or radiotherapy treatment at least one year before the start of the workshop.
- 2.5 hour sessions, 1 day a week, 7 weeks.

2018

1st ONLINE PROGRAMME INTERVENTION

Expert Patient 2.0

Time incompatibility
Geographical dispersion
Stigma

Scope: 200 people

Online programme developed by Stanford. Used by 200 organisations worldwide.

Vively has exclusive distribution rights for the online programme in Spain and Latin America.

BASIC GUIDELINES

For Online participants

- Dedication and participation.
- Use of the platform.
- Respect and confidentiality.
- Protection of identity and personal data.
-



SUMMARY: CONTENTS OF THE WORKSHOP/COURSES



Basic knowledge about the disease

Food

Exercise

Handling of emotions

Problem solving techniques

Activation tools. Establishment of individual objectives adapted to your situation

Appropriate use of medication

Communication techniques



+ 7,500 participants in the Basque Country
+340 monitors

CORONAVIRUS

EN EUSKADI

PAZIENTE BIZIA
PACIENTE ACTIVO



ON LINE METHODOLOGY



How: 100% online and free.

Duration: 6 sessions /6 weeks. Commitment/dedication 30 min, at least 3 times a week.

What the need: laptop or desktop computer, tablet or mobile with internet connection and an email account.

For whom: People with basic technological skills

Platform management: Mentor and/or administrator

Web link: http://osakidetza-pax.vively.es/users/sign_in

Administrator enables: User profile and password

ON LINE
METHODOLOGY



Methodology: Reading, learning self-care skills, interaction with group members about problems, achievements, difficult emotions, objectives...

Training coordination: 2 FACILITATORS (trained and accredited monitors of the programme methodology)

SCOPE: 15/25 participants per course People **living with or without** chronic illness. Focus **PROMOTION**

Participant information: Name and surname, contact telephone number and an e-mail account.

Anonymity: ALIAS

Personal information available only to facilitators and mentors.



FACE-to-FACE

7/8 Sessions
1 day x week
2,5h



VIDEO CONFERENCE

7/8 Sessions
1 day x week
2,5h

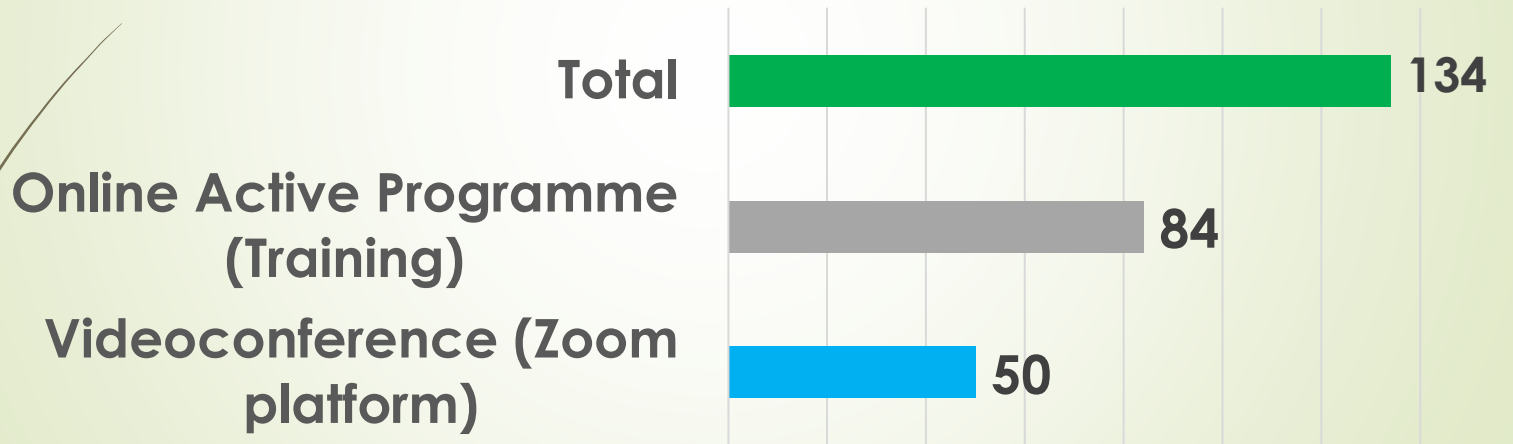
**Programme
coordination**



Access guidelines/protocols

<https://osakidetza.zoom.us/j/XX>

2020 Number of Participants Telematic modality



RECORD IN THE MEDICAL HEALTH RECORD: OSABIDE GLOBAL

Historia Clínica

Gadgets

Sociosanitario

Pruebas Anatomía Patológica

Constantes del Paciente 1

Cuidados de Enfermería

Evolutivos del paciente 3

Formularios

Gestor de informes

ITs

Petición Pruebas Laboratorio AP

Marcar Imágenes

Percentiles Pediatría

Próximas Citas

Petición de Consultas

Petición de Radiología

Prerredactados

Cartilla de Embarazo

Petición de Pruebas

Telemonitorización

Evolución (Anamnesis y Exploración física)

Buscar:

Buscar profesional:

2 abril 2007, lunes

Primaria

Goenaga Badiola, M^a Eugenia

Médico - Primaria - OINDARRETA C.S. - DESCONOCIDA

CLINICA COMPATIBLE CON SINUSITIS

Programa Paciente Activo

Paciente: M. LOURDES OCHOA DE RETANA GARCIA Edad: 52 años

Fecha Datos 05/09/2017 09 : 07

Guardar

PACIENTE ACTIVO GENERICO

El paciente acude a sesión nº:

El paciente no acude a sesión nº:

Método de captación:

Usuario:

Finalización de taller:

Motivo de no finalización de taller:

PACIENTE ACTIVO DIABETES

El paciente acude a sesión nº:

El paciente no acude a sesión nº:

Método de captación:

Usuario:

Finalización de taller:

Motivo de no finalización de taller:

PACIENTE ACTIVO ONCOLOGÍA

El paciente acude a sesión nº:

El paciente no acude a sesión nº:

Método de captación:

Usuario:

Finalización de taller:

Motivo de no finalización de taller:

PACIENTE ACTIVO INSUFICIENCIA CARDÍACA

El paciente acude a sesión nº:

El paciente no acude a sesión nº:

Método de captación:

Usuario:

Finalización de taller:

Registro de asistencia a talleres. Paciente Activo. Osakidetza 2017

+

Guardar

000

000

PROGRAMME REFERENTS

In each Integrated Healthcare Organization (IHO) there is a referent (nurse) who liason the programme coordination.

IMPLEMENTATION GUIDELINE

Paziente Bizia- Paciente Activo programme:

Tfno.: 943 00 65 51//616 655 215

Email: pacienteactivo@osakidetza.eus

Address: Ambulatorio de Gros. Avenida de Navarra 14
20013 San Sebastián

Lourdes Ochoa de Retana García (*Responsable del Programa*)

Irene Duo Trecet (*Referente OSI Donostialdea*)

SIAC (Support):

Tfno.: 945 00 60 84

INTEGRACION.OFICINACRONICIDAD@osakidetza.eus



GENERAL OBJECTIVE:

To increase patient empowerment through training workshops in self-care and disease management, seeking to empower patients to better understand their disease, to take responsibility for their health and to participate in shared decision-making with health professionals.

SPECIFIC OBJETIVES:

Implementation manual is available in each IHO, which sets out the characteristics of the programme, general objectives and specific targets.

The Contract Framework (“Contrato Programa”) assesses the degree of deployment of the Programme in each organisation on the basis of certain indicators.

D2.1 EXISTENCIA DEL PROGRAMA DE PACIENTE ACTIVO EN CADA OSI

D2.1E1 Definición del programa en la OSI

La OSI ha definido el despliegue del programa, y para tal fin, ha formado profesionales en metodología de Paciente activo. El indicador valora la elaboración de un documento en el que se especifican los contenidos necesarios.

- Aplicable a todas las OSI

- La puntuación se obtiene mediante la suma de los valores de los distintos criterios

Posibles evidencias: De forma previa a la realización de la entrevista con el Equipo Directivo de la OSI se han de solicitar las siguientes evidencias:

- Planificación de la formación en materia de paciente activo en la OSI

- Documentación de base empleada en la formación: contenidos de la sesión, folletos, material de trabajo, etc.

- Plan de despliegue del programa en la OSI

Nota: Se debe valorar el acceso de personas con enfermedad mental a las actividades desarrolladas en este programa

CONTRACT FRAMEWORK

Elaboración de documento en el que se especifica:
Objetivos del programa a alcanzar por la OSI
Responsable del programa en la OSI (Nombre y apellidos)
Selección de las patologías en las que se va a trabajar mediante el método paciente activo
Actividades a realizar para cumplir los objetivos
Selección de los pacientes participantes
Identificación de indicadores para la evaluación

SUMATORIO

Se ha definido una estrategia para captar pacientes y para captar a otros profesionales (alianzas con empresas, OSALAN, asociaciones de pacientes, tercer sector, ...)

D.2.1D.1 Análisis del funcionamiento del programa y difusión de mismo.

Difusión del programa a través de sesiones formativas (internas y/o externas; charlas, jornadas, congresos ...) realizadas para informar del programa, dirigidas a pacientes y profesionales. Se trabaja en la difusión del programa "Cuidando activamente mi salud" y otros talleres, en todos los ámbitos.

Se valora la difusión del programa a través de la utilización de la red informática: el programa está en la Intranet.

Se valora la realización de sesiones de análisis del funcionamiento del programa con los profesionales

Se valora la presencia en el centro de Salud de poster y dípticos informativos al alcance de la ciudadanía

Se valora la realización de Sesiones informativas para colectivos específicos del área de cada centro de salud (hogares de jubilados, asociaciones de mujeres, amas de casa, sesiones en el centro de salud para personas con patología crónica)

- Aplicable a todas las OSI

- La puntuación se obtiene mediante la suma de los valores de los distintos ítems

D.2.ID.1 Análisis del funcionamiento del programa y difusión de mismo.

Difusión del programa a través de sesiones formativas (internas y/o externas; charlas, jornadas, congresos....) realizadas para informar del programa, dirigidas a pacientes y profesionales. Se trabaja en la difusión del programa "Cuidando activamente mi salud" y otros talleres, en todos los ámbitos.

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- Aplicable a todas las OSI

- La puntuación se obtiene mediante la suma de los valores de los distintos ítems

D2.ID3 Grado de difusión del programa en base al número de patologías trabajadas con la metodología paciente activo

Difusión del programa en base al número de patologías trabajadas con la metodología paciente activo

D2.IR1 N° de monitores activos por OSI

Definición: Valoración cuantitativa de resultados del Programa de paciente activo en las OSI en base al número de monitores activos (al menos con una participación durante el periodo de evaluación) por OSI y en consideración al número de TIS activas de personas adultas

Estándar: 1 monitor activo por cada 25.000 TIS

D2.IR2 N° de pacientes formados

Valoración cuantitativa de resultados del Programa de paciente activo en las OOS/OSI en base al número acumulado de pacientes formados por monitores del Programa y en consideración al número de TIS activas de personas adultas

Estándar: 5 pacientes por cada 10.000 TIS

D2.IR3 % pacientes en el grupo de monitores

Valoración cuantitativa y en términos relativos de los resultados del Programa de paciente activo en las OSI considerando la mayor o menor presencia de pacientes en el grupo de monitores de la OS/OSI

*Fórmula de cálculo: N° de pacientes en el grupo de monitores en activo *100/N° de monitores en activo*

Numerador: N° de pacientes en el grupo de monitores en activo Denominador : N° de monitores en activo

D2.IR4 % profesionales que han enviado al menos un paciente al programa

Contabilizar el n° de CUPOS de AP que han enviado al menos un paciente al programa

Criterios para el cálculo de la puntuación: Escalable. Valorar el porcentaje de cumplimiento y puntuar de manera proporcional en una escala de 0 a 100.

D2.IR5 Tasa de finalización

Contabilizar el % de pacientes que acaban los talleres

*Fórmula de cálculo: N° de pacientes que acaban el programa*100/n° de pacientes que inician el programa*

Se evalúa respecto al n° de pacientes que han iniciado el programa durante el periodo de evaluación (no acumulado)

Se considera que un paciente ha finalizado el taller cuando ha asistido a 5 o más sesiones (sin contabilizar la sesión "0", que es la sesión informativa inicial). Estándar: 75%.

Criterios para el cálculo de la puntuación -Escalable. Valorar el porcentaje de cumplimiento y puntuar de manera proporcional en una escala de 0 a 100.

CONTRACT FRAMEWORK

Scientific publications

<https://www.elsevier.es/es-revista-atencion-primaria-27-articulo-la-formacion-entre-iguales-pacientes-S0212656715003790>

Aten Primaria. 2016;48(5):507-517



ORIGINAL

La formación entre iguales para pacientes con diabetes mellitus 2. Una evaluación cuantitativa y cualitativa en el País Vasco y Andalucía

Alina Danet^{a,*}, María Angeles Prieto Rodríguez^{a,b}, Estibaliz Gamboa Moreno^a, Lourdes Ochoa de Retana García^a y Joan Carles March Cerdà^{a,b}

^a Ciber Epidemiología y Salud Pública, Instituto de Salud Carlos III, Madrid, España

^b Escuela Andaluza de Salud Pública, Granada, España

^c Centro de Salud Pasajes San Pedro (DS Donostialdea), Pasajes San Pedro, Guipúzcoa, España

Recibido el 20 de mayo de 2015; aceptado el 13 de octubre de 2015
Disponible en Internet el 10 de marzo de 2016

PALABRAS CLAVE

Formación entre iguales;
Diabetes;
Investigación cuantitativa;
Investigación cualitativa

Resumen

Objetivo: Evaluar la estrategia formativa entre iguales para pacientes con diabetes mellitus tipo 2 en los programas «Paciente Activo» (País Vasco) y «Escuela de Pacientes» (Andalucía). **Diseño:** Diseño mixto cuantitativo/cualitativo de evaluación pre/post de los programas de formación llevados a cabo entre 2012 y 2014. **Emplazamiento:** País Vasco y Andalucía.

Participantes: Un total de 409 pacientes y pacientes formadores, participantes en la formación entre iguales. **Nuestro intervención:** 44 pacientes para el estudio cualitativo. **Método:** Análisis estadístico bivariante y generación de redes de las variables comunes de cuestionario pre/post del País Vasco y Andalucía sobre autonomía, satisfacción, diabetes, educación.

<https://pubmed.ncbi.nlm.nih.gov/30409669/>

PRIMARY CARE DIABETES XXX (2018) XXX-XXX



Contents lists available at ScienceDirect

Primary Care Diabetes

journal homepage: <http://www.elsevier.com/locate/pcd>

PCDE
PRIMARY CARE DIABETES EDUCATION



Original research

Efficacy of a self-management education programme on patients with type 2 diabetes in primary care: A randomised controlled trial

<https://pubmed.ncbi.nlm.nih.gov/23718222/>

Gamboa Moreno et al. BMC Public Health 2013, 13:521
<http://www.biomedcentral.com/1471-2458/13/521>



STUDY PROTOCOL

Open Access

Impact of a self-care education programme on patients with type 2 diabetes in primary care in the Basque Country

Estibaliz Gamboa Moreno^a, Alvaro Sánchez Perez^a, Kallioi Vrotsou^a, Juan Carlos Arbones Ortiz^a, Emma del Campo Peña^a, Lourdes Ochoa de Retana García^a, María Angeles Rua Portu^a, Koldo Piñera Elorriaga^a, Amaya Zenarutzelabeta Pikatza^a, Miren Nekane Urquiza Bengoa^a, Rosario Sanz Echave^a, Tomás Méndez Sampedro^a, Ana Osés Portu^a, Lourdes Gorostidi Fano^a, Miren Bakarre Aguirre Sorondo^a, Rafael Rotaache Del Campo^a, In the name of the Osakidetza Active Patient Research Group

Abstract

Background: Type 2 diabetes mellitus (DM2) is a disease with high prevalence and significant impact in terms of mortality and morbidity. The increased prevalence of the disease requires the implementation of new strategies to promote patient self-management. The Spanish Diabetes Self-Management Program (SDSMP) has proven to be effective in other settings. The objective of this study is to assess its effectiveness in terms of care for DM2 patients in primary care settings within the Basque Health Service – Osakidetza (Spain).

Method/Design: This is a randomised clinical trial in which patients diagnosed with DM2, 18-79 years of age, from four health regions within the Basque Health Service will be randomised into two groups: an intervention group, who will follow the SDSMP, and a control group, who will receive usual care in accordance with the clinical guidelines for DM2 and existing regulations in our region. The intervention consists of 2.5-hour-group sessions once a week for six weeks. The sessions cover target setting and problem solving techniques, promotion of physical exercise, basic knowledge of diabetes, management of medication, effective communication with relatives and health

Hindawi Publishing Corporation
Journal of Diabetes Research
Volume 2016, Article ID 7426773, 10 pages
<http://dx.doi.org/10.1155/2016/7426773>



Research Article

A Pilot Study to Assess the Feasibility of the Spanish Diabetes Self-Management Program in the Basque Country

Estibaliz Gamboa Moreno¹, Lourdes Ochoa de Retana García², María Emma del Campo Peña³, Alvaro Sánchez Perez⁴, Catalina Martínez Carazo⁵, Juan Carlos Arbones Ortiz⁶, María Angeles Rua Portu⁷, Koldo Piñera Elorriaga⁸, Amaya Zenarutzelabeta Pikatza⁹, Miren Nekane Urquiza Bengoa⁹, Tomás Méndez Sampedro⁹, Ana Osés Portu¹⁰, Lourdes Gorostidi Fano¹⁰, Miren Bakarre Aguirre Sorondo¹¹, Kallioi Vrotsou¹² and Rafael Rotaache Del Campo¹²

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³ Research Unit, Primary Care-Organization of Integrated Health Services of Vizcaya, Osakidetza, Bilbao, Spain

⁴ Donostialdea Integrated Health Organisation, Osakidetza, Bermeo Health Center, Bermeo, Guipúzcoa, Spain

⁵ Donostialdea Integrated Health Organisation, Osakidetza, Bidebidea Health Center, San Sebastián, Spain

⁶ O + Berr, Basque Institute for Healthcare Innovation, Barakaldo, Vizcaya, Spain

⁷ Family Medicine and Community Teaching Unit of Vizcaya, Osakidetza, Bilbao, Spain

⁸ Araska Area, Osakidetza, Oteagabel Health Center, Vitoria Gasteiz, Spain

⁹ Euzkadiako Eskarriak Cruces Integrated Health Organisation, Osakidetza, Ortuella Health Center, Ortuella, Vizcaya, Spain

¹⁰ Basque Integrated Health Organisation, Osakidetza, Hondarribia Health Center, Hondarribia, Guipúzcoa, Spain

¹¹ Research Unit, Primary Care-Organization of Integrated Health Services of Guipúzcoa, Osakidetza, San Sebastián, Spain

¹² Research Unit, Primary Care-Organization of Integrated Health Services of Guipúzcoa, Osakidetza, San Sebastián, Spain

PACIENTE BIZIA
PACIENTE ACTIVO





www.osakidetza.euskadi.eus/pacienteactivo/



<https://osakidetzaarenosasuneskola.com/>



<https://www.facebook.com/PacienteActivoPazienteBizia>



<http://twitter.com/PacienteActivo>



<https://www.instagram.com/pacienteactivo/>



<http://www.youtube.com/OsakidetzaEJGV>



OSASUN ESKOLA BLOG: PAZIENTE BIZIA- PACIENTE ACTIVO

Punto de encuentro del programa Paziente Bizia-Paciente Activo en el que compartimos, mostramos y aprendemos aquellas cosas que consideramos de interés.

INICIO AURKEZPENA. PRESENTACIÓN HURRENGO TAILERRAK. PRÓXIMOS TALLERES

NOR GARA? ¿QUIÉNES SOMOS? ZEIN DA ZURE IRITZIA? Y TÚ ¿QUÉ OPINAS?



PROBA MEDIKOEN EGUNAK:
GAUR DOPPLER EKO BAT EGIN
DIDATE/DÍAS DE PRUEBAS: HOY
ME HAN HECHO UNA
ECO DOPPLER

05/11/2020

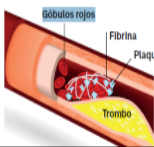
De Programa
Paziente Bizia-
Paciente Activo

em PACIENTE
ACTIVO,

TRATAMIENTO,
SALUD, CUIDANDO
MI SALUD DESPUÉS
DEL CANCER

Etiquetas: #CÁNCER,
#METÁSTASIS,
#TRATAMIENTO
DEJA UN

COMENTARIO
ola.com/acerca-de/
ENTRAR



Abuztuaren amaieran ostipalera joan behar izan
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batzuk normal baino min handiagoa egiten hasi
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W Siguiendo Osasun Eskola Blog: Paziente Bizia-Pa

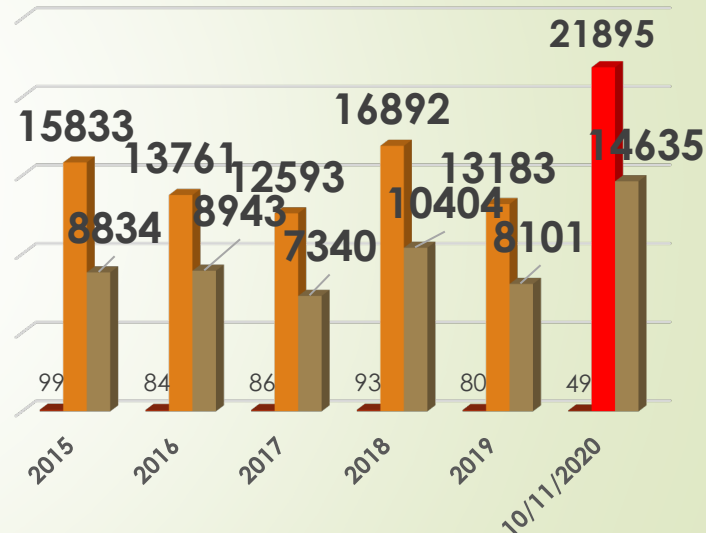
SÍGUENOS EN TWITTER

Mis tuits

SÍGUENOS EN FACEBOOK



Blog



■ Publications ■ Vists ■ Unic visits

PAZIENTE BIZIA-
PACIENTE ACTIVO



Osakidetza



EUSKO JAURLARITZA
GOBIERNO VASCO

SOME FEEDBACK FROM PARTICIPANTS



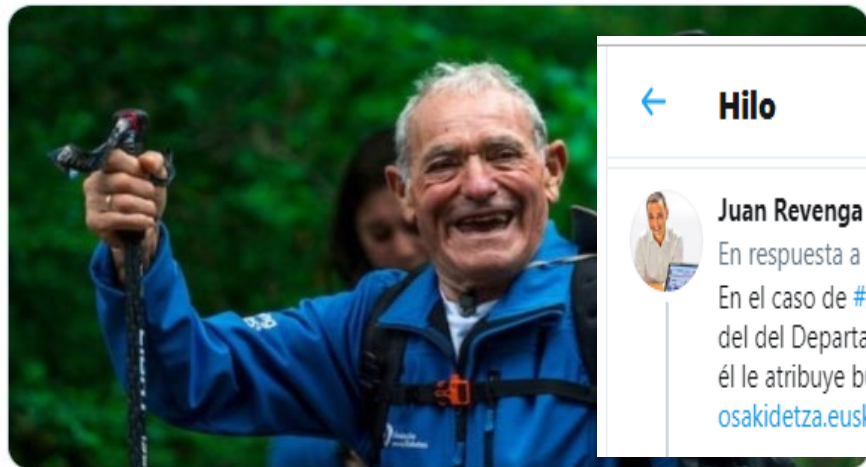
- "It has helped me to become aware of my illness, to know my disease and to take responsibility..."
- "Very useful, for the chronically ill and recommended."
- "The material of obligatory review".
- "This course is great. A confrontation with my reality and where I see my shortcomings in my care".
- "I see in the experiences of my colleagues and their doubts, my own, and it helps me to feel understood and to understand them".
- "It has given me many tools to take care of my health, to better understand the disease and all the feelings I have at that moment".
- "Managing positively, I have learned that positivity helps you to manage things much better, even brings you serenity and less stress and anxiety".
- "I have increased my willpower and with it my self-esteem".

Hilo



Juan Revenga ✓ @juan_revenga · 1 sept.

Pocas veces me he sentido tan emocionado a la hora de publicar un post. Y no es por mérito mío, sino porque en él cuento el caso de [#Avelino](#) un paciente de 77 años, 37 de ellos con diabetes tipo 2. El post está aquí patiadiabetes.com/posiblemente-m... Pero abro [#hilo](#) y os cuento



Álex Pérez y 9 más

15

157

351



Juan Revenga ✓ @juan_revenga · 1 sept.

El caso es que, para mí y por lo que conozco, [#Avelino](#) es el mejor paciente del mundo y más allá de su humanidad, su caso está lleno de datos objetivos sorprendentes. Uno de ellos es que tras llegar a usar más de 60 uds de insulina/día, en 2009 prescindió totalmente de ella.



Hilo



Juan Revenga ✓ @juan_revenga · 1 sept.

En respuesta a [@juan_revenga](#)

En el caso de [#Avelino](#) es necesario destacar el programa "El paciente activo" del del Departamento de Salud del Gobierno Vasco [@osakidetzaEJGV](#) al que él le atribuye buena parte de los éxitos de su caso osakidetza.euskadi.eus/pacienteactivo/

PAZIENTE BIZIA
PACIENTE ACTIVO



Osakidetza



Cuidando activamente
mi salud



Kontakizunak Relatos

Programa Paziente Bizia - Paciente Activo



Euskadi, auzolana, bien común



PAZIENTE BIZIA
PACIENTE ACTIVO



<https://osakidetzaarenosasuneskola.files.wordpress.com/2019/01/libro-relatos-paciente-activo-ok.pdf>

ESCOLA GALEGA
DE SAÚDE
PARA
CIDADÁNS

Paciente Activo Asturias

aprendiendo
a vivir
Escuela cántabra de salud

PAZIENTE BIZIA
PACIENTE ACTIVO

ESCUELA
DE SALUD
OSASUN
ESKOLA

Navarra

portal de
SALUD
Castilla y León

Aula de Pacientes de
Castilla y León



escuela de salud y cuidados
de castilla-la mancha

Escuela de
CUIDADOS
y SALUD
Extremadura



ESCUELA DE PACIENTES
Servicio Riojano de Salud

Escuela
deSalud

Aragón

PROGRAMA
PACIENTE
EXPERTO
CATALUÑA®



ESCUELA DE
PACIENTES

Canarias

Feim salut, faig salut

Baleares

Escuela de Salud

Murcia

Programa
Pacient Actiu

Comunidad
Valenciana

ESCUELA
MADRILEÑA
DE SALUD

PAZIENTE BIZIA
PACIENTE ACTIVO



Osakidetza



POSITIVE ASPECTS OF THE PROGRAMME

- Promoting empowerment.
- Improvement of the health-patient relationship.
- Promotion of a new care model.
- Holistic vision of care.
- Interest generated.
- High degree of satisfaction (surveys).
- New lines of research on the programme are opened.



LESSONS LEARNED

- It plays a small part within an overall strategy to improve the health of the population.
- It is necessary to work WITH and not FOR.
- It is essential to seek alliances between the different agents.
- A change in philosophy is needed.
- The patient: the "least used resource" in the health system.
- Empowerment from a holistic vision of care.
- The road is long, this is just the beginning.





Thank you!



Eskerrik asko!

Learning Outcomes



European Innovation
Partnership on Active
and Healthy Ageing

Go to www.menti.com

Use Code: 15 04 517

Key Learning – Question 1

Rank the benefits that the video consultation can provide to the system, health & care professionals and patients

Ponga en orden de importancia los beneficios que la videoconsulta puede proporcionar

Key Learning – Question 2

What do you think are the key challenges for implementing video consulting tools?

Cuáles cree que son los principales desafíos para la i?

Key Learning – Question 3

To what extent do you agree that the Near Me model can help Osakidetza to advance in the implementation of video consultation?

Hasta donde crees que el modelo Near Me puede ayudar a Osakidetza a avanzar en la implementación de la video consulta?

Key Learning – Question 4

Please define your experience of the Basque Country / Scotland twinning 2020 in one word

Por favor, define el hermanamiento de Escocia y el País Vasco en 2020 en una palabra.

Key Learning – Question 5

What would you like to learn more about (after the twinning)?

¿Sobre qué le gustaría aprender más (después del hermanamiento)?